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maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission. Dinsmore & 75hohl LLP06/17/2004
KILLWORTH GOTTMAN HAGAN & SCHAEFE Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO, on the date indicated below. ONE DAYTON CENTRE ONE SOUTH MAIN STREET SUITE 500 1300 DAYTON, OH 454022023 SEP 0 3 2004 (Depositor's na Reed Red. No. nut (Signat (D Sentember 2004 FIRST NAMED INVENTOR APPLICATION NO. FILING DATE ATTORNEY DOCKET NO. CONFIRMATION NO. 02/19/1998 09/026,080 DAVID R. HEMBREE MI0-020-IA TITLE OF INVENTION: SPRING ELEMENT FOR USE IN AN APPARATUS FOR ATTACHING TO A SEMICONDUCTOR AND A METHOD OF ATTACHING APPLN. TYPE SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE NO nonprovisional \$1330 \$0 \$1330 09/17/2004 **EXAMINER** ART UNIT CLASS-SUBCLASS POTTER, ROY KARL 257-048000 2822 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or Dinsmore & Shohl LLP agents OR, alternatively, (2) the name of a single ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Micron Technology, Inc. Boise, ID individual to corporation or other private group entity Please check the appropriate assignee category or categories (will not be printed on the patent); 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. - Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached. ☐ Advance Order - # of Copies _ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number ______ (enclose an extra copy of this form). Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. (Authorized Signature) (Date) ⊮n D. Reed, Reg. No. 46,506 September 1, 2004 09/07/2004 AWONDAF2 00000060 09026080 NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. 01 FC:1501 1330.00 OP This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

SP 0 3 2004 40

PTO/SB/17 (10-03)
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FEE TRANSMITTAL
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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,330.00

espond to a collection of line	rmation unless it displays a valid OMB control number.			
Complete if Known				
Application Number	09/026,080			
Filing Date	February 19, 2001			
First Named Inventor	David R. Hembree			
Examiner Name	Potter, Roy Karl			
Art Unit	2822			
Attorney Docket No.	MIO 0020 IA/40509.42 (97-0198.01)			

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)		
✓ Check Credit card Money Other None	3. ADDITI	ONAL FEES		
Deposit Account:	Large Entity	Small Entity		
Deposit	Fee Fee Code (\$)	Fee Fee Fee Description Code (\$) Fe	ee Paid	
Account Number	1051 130	2051 65 Surcharge - late filing fee or oath		
Deposit Account	1052 50	2052 25 Surcharge - late provisional filing fee or cover sheet		
Name The Director Is authorized to: (check all that apply)	1053 130	1053 130 Non-English specification		
Charge fee(s) indicated below Credit any overpayments	1812 2,520	1812 2,520 For filing a request for ex parte reexamination		
Charge any additional fee(s) or any underpayment of fee(s)	1804 920*	1804 920* Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.	1805 1,840*	1805 1,840* Requesting publication of SIR after Examiner action		
FEE CALCULATION	1251 110	2251 55 Extension for reply within first month	- 1	
1. BASIC FILING FEE	1252 420	2252 210 Extension for reply within second month		
Large Entity Small Entity	1253 950	2253 475 Extension for reply within third month		
Fee Fee Fee Fee Description Fee Paid	1254 1,480	2254 740 Extension for reply within fourth month		
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255 2,010	2255 1,005 Extension for reply within fifth month		
1002 340 2002 170 Design filing fee	1401 330	2401 165 Notice of Appeal		
1003 530 2003 265 Plant filing fee	1402 . 330	2402 165 Filing a brief in support of an appeal		
1004 770 2004 385 Reissue filing fee	1403 290	2403 145 Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451-1,510-	1451 1,510 Petition to institute a public use proceeding	• :	
SUBTOTAL (1) (\$) -0-	1452 110	2452 55 Petition to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,330	2453 665 Petition to revive - unintentional		
Fee from	1501 1,330		,330.00	
Extra Claims below Fee Paid Total Claims X X	1502 480	2502 240 Design issue fee		
Independent 3** - V	1503 640	2503 320 Plant issue fee		
Claims	1460 130	1460 130 Petitions to the Commissioner		
Large Entity Small Entity	1807 50	1807 50 Processing fee under 37 CFR 1.17(q)		
Fee Fee Fee Fee Description	1806 180	1806 180 Submission of Information Disclosure Stmt		
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021 40	8021 40 Recording each patent assignment per property (times number of properties)		
1202	1809 770	2809 385 Filing a submission after final rejection (37 CFR 1.129(a))		
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770	2810 385 For each additional invention to be		
1204 86 2204 43 ** Reissue independent claims over original patent	1801 770	examined (37 CFR 1.129(b)) 2801 385 Request for Continued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900	1802 900 Request for expedited examination of a design application		
SUBTOTAL (2) (\$) -0-	Other fee (sp	ecify)L		
**or number previously paid, if greater; For Reissues, see above	*Reduced by	Basic Filing Fee Paid SUBTOTAL (3) (\$) 1,33	30.00	
SUBMITTED BY (Complete (if applicable))				

Name (Print/Type)

John D. Reed

Registration No. (Attorney/Agent)

Additional Action (937) 449-6400

Date September 1, 2004

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